ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ELIZA		04-17-01
O.I.P.E. C'LASSIFIER	mw	0	DT-10-01
FORMALITY REVIEW	TA	-EMU	06/05/01
RESPONSE FORMALITY REVIEW	4-6-8-3		08 03 101

INDEX OF CLAIMS

V	Rejected	N	Non-elected
	WINAACG	ı	Interference
_	(Through numeral) Canceled	Α	Appeal
•	Restricted	_	Objected

÷ Restricted 0 Objected								
Claim	Date	Claim	Date	Claim	Date			
Final Original	6 iz 02	Final Coriginal		Final				
2		52		101				
3 4		53		103				
5 6 7		56		105				
8		57		107				
9		59		109				
10		62		111				
13		63		113				
15 16		65		115				
17		67		117				
19		68		118				
20		70 71		120				
22		73		122				
24 25		74		124				
26 27		76		126				
28		78 79		127				
30		80		129				
31		81 82		131				
33		83		133				
35		85		135				
37		87		137				
39 40		89		139				
41		91 92		141				
43		93		142				
44)		94		144				
46		96		146				
48		98		148				
50	• _ _ _ _	100		150				

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)

